



APPLICATION FORM

Title:	Surname:
First Name(s):	
Address:	
Postcode:	
Home Tel No:	Mobile No:
Day Tel No:	Email:
Date of Birth:	Gender: male female
Occupation:	
Qualifications/Training	School/College/Organisation
Work Experience (related to health and fitness, instructing etc)	Personal Interests

Individual Needs Please give details if you require extra help so we can discuss this with you e.g. writing, dyslexia, hearing impairment, wheel chair access
Course/Workshop Title and Code:
Course/Workshop Date and Venue
How did you hear about us?



Do you have any concerns about taking this course/workshop?

Select Payment Method:

- ☐ PayPal
- ☐ Cheque (made payable to FITT)

Select Costs: (see website Price List for more details)

- | | | |
|--|---|-------|
| <input type="checkbox"/> 20% deposit | £ | _____ |
| <input type="checkbox"/> Payment in full | £ | _____ |
| <input type="checkbox"/> EFK Manual | £ | _____ |
| <input type="checkbox"/> Practical Manual(s) | £ | _____ |
| <input type="checkbox"/> Assessment Fee | £ | _____ |
| Total amount paid | £ | _____ |

Declaration

I confirm the above information I have given is correct best to my knowledge. I consent to Fitness Inspired Teacher Training processing my personal data and any other data given connected with my studies on the above course/workshop.

I confirm the fees will be paid in full 4 weeks prior to the course/workshop commencing.

Applicant's Signature _____

Print Name _____

Date _____

Please return this form with your cheque to:

Fitness Inspired Teacher Training
59 Gloster Drive
Nyetimber
Bognor Regis
West Sussex
PO21 3JN